GOVERNMENT OF THE DISTRICT OF COLUMBIA

DEPARTMENT OF BEHAVIORAL HEALTH Policy No.

Date

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300.1A

2/13/2023

Supersedes

300.1, Level of Care Determinations for Adults in MHRS

Subject: Level of Care Determinizations for Adults in MHRS

- 1. Purpose. To establish a policy and procedures for the Department of Behavioral Health (DBH) and DBH-certified Core Service Agencies (CSA), sub-providers and specialty providers to utilize the Daily Living Activities-20 (DLA-20) assessment to determine level of care and functional assessment for all adult consumers receiving services from DBH, a CSA, a sub-provider or a specialty provider. This version of the policy has replaced reference to the Level of Care Utilization System with the DLA-20 as DBH's current functional assessment tool.
- 2. Applicability. DBH and DBH-certified CSAs, sub-providers and specialty providers serving adults.
- 3. Authority. DBH Establishment Act of 2013, D.C. Code §§ 7-1141 et seq.; Title 22-A District of Columbia Municipal Regulations (DCMR) Chapter 34, Mental Health Rehabilitation Services Provider Certification Standards; Title 22-A DCMR Chapter 80, Certification Standards for Behavioral Health Stabilization Providers.

4. Definitions.

- a. Active Adult Consumer. A person age eighteen (18) or older who is receiving mental health services and/or supports from a DBH certified CSA, specialty provider or sub-provider.
- b. <u>Assertive Community Treatment (ACT).</u> An intensive, integrated, rehabilitative, treatment and community-based service provided by an interdisciplinary team to adults with serious and persistent mental illness.
- c. <u>Certified DLA-20 Trainer.</u> A staff member from DBH, a CSA, a sub-provider or a specialty provider who has completed a train-the-trainer course about DLA-20 assessment implementation with MTM Services.
- d. <u>Daily Living Activities 20 (DLA-20)</u>. A tool designed to reliably assess twenty (20) areas of functioning for adults impacted by mental illness or disability.

- e. <u>Level of Care (LOC)</u>. A determination of the intensity and type of mental health services required to meet the goals established in an active adult consumer's Plan of Care.
- f. Mental Health Community Residence Facility (MHCRF). A DBH-licensed publicly or privately owned residence that houses individuals ages eighteen (18) or older with a principal diagnosis of mental illness that require twenty-four (24) hour on-site supervision, personal assistance, lodging, and meals and who are not in the custody of the D.C. Department of Corrections.
- g. Child and Adolescent Functional Assessment Scale (CAFAS). A rating scale which assesses functional impairment in youth ages six (6) through twenty (20).
- h. <u>Preschool and Early Childhood Functional Assessment Scale (PECFAS)</u>. The version of the CAFAS which applies to children ages three (3) to five (5) years old, which assesses a child's day-to-day functioning across critical life domains. This assessment is conducted every ninety (90) days to monitor progress or improvement over time.
- 5. **Policy.** DBH, CSAs, sub-providers and specialty providers shall administer the DLA-20 assessment (See Exhibit 1) to all active adult consumers to ensure they receive services that are individualized, clinically appropriate, and provided in the least restrictive setting.
 - The DLA-20 shall be DBH's approved functional assessment and LOC tool for adults.
 - b. DBH, CSAs, sub-providers and specialty providers shall utilize the DLA-20 assessment as part of their treatment planning process to determine the appropriate LOC for each active adult consumer. DBH, CSAs, sub-providers and specialty providers shall tailor treatment interventions to each active adult consumer based on the results of the DLA-20 assessment. DBH, CSAs, sub-providers and specialty providers shall conduct the DLA-20 assessment utilizing the DLA-20 Anchors (See Exhibit 2) and DLA-20 Scoring Rules (See Exhibit 3) as guidance to score the DLA-20.
 - c. DBH, CSAs, sub-providers and specialty providers may utilize the CAFAS instead of the DLA-20 to assess adults ages eighteen (18) through twenty (20) who meet criteria for Community Based Intervention Services. See DBH Policy 300.2, Functional Assessments for Children and Youth.
 - d. DBH, CSAs, sub-providers and specialty providers shall include DLA-20 assessments and results in active adult consumers' clinical record and incorporate DLA-20 assessment findings when developing a person-centered Plan of Care.

- e. DBH, CSAs, sub-providers and specialty providers shall not use an active adult consumer's DLA-20 score to force treatment or services or to deter consumer choice.
- f. The DBH Accountability Administration may use data gathered from the DLA-20 for system monitoring, quality improvement and performance evaluation.
- 6. **Procedures.** DBH, CSAs, sub-providers and specialty providers shall conduct a DLA-20 assessment in accordance with the following:
 - a. DBH, CSAs, sub-providers and specialty providers shall conduct a DLA-20 assessment in the following circumstances:
 - i. At intake. DBH, CSAs, sub-providers and specialty providers shall conduct a DLA-20 assessments for all active adult consumers presenting for intake utilizing as much collateral information as possible from persons and entities with contact with the active adult consumer within the thirty (30) calendar days preceding the assessment.
 - ii. Continuing treatment. DBH, CSAs, sub-providers and specialty providers shall conduct a DLA-20 assessment for active adult consumers in continuing treatment at a minimum of every ninety (90) calendar days from the date of intake.
 - iii. Changes in MHCRF Levels of Care. The CSA, sub-provider or specialty provider shall complete a DLA-20 assessment whenever an active adult consumer is scheduled to change MHCRF levels of care. Following the move, the CSA, sub-provider or specialty provider shall conduct a DLA-20 assessment in conjunction with the active adult consumer's new plan of care and every ninety (90) calendar days thereafter.
 - iv. Consumers at Saint Elizabeth's Hospital (SEH). The CSA, sub-provider or specialty provider shall complete a DLA-20 assessment with input from SEH's treatment planning team as part of an active adult consumer's discharge planning to determine their acuity and level of care.
 - v. Consumers who are incarcerated. The CSA, sub-provider or specialty provider, in consultation with the mental health staff at Central Detention Facility, shall complete a DLA-20 assessment upon an active adult consumer's initial placement in detention and prior to release from detention.
 - vi. As clinically indicated, DBH, a CSA, sub-provider or specialty provider shall complete a DLA-20 assessment any time an active adult consumer experiences significant events that may affect their functioning (e.g., visit to crisis emergency provider or hospitalization).

- vii. DBH, a CSA, sub-provider or specialty provider shall complete a DLA-20 assessment for each active adult consumer prior to their discharge from treatment/services.
- 6b. Specialty Providers. For active adult consumers enrolled in a CSA and referred to a specialty provider, the specialty provider shall complete the DLA-20 assessment.
 - i. ACT. The CSA shall conduct the DLA-20 assessment for referral to ACT. The ACT provider shall complete the DLA-20 assessment every ninety (90) calendar days thereafter, or sooner if clinically indicated.
 - ii. Crisis Beds. If an active adult consumer is referred to a crisis bed and the crisis is not resolved within forty-eight (48) hours, the crisis bed provider shall request authorization from DBH for the active adult consumer's continued stay by providing a completed DLA-20 assessment, psychiatric evaluation and clinical presentation to Access Helpline.
- 6c. Prior Authorizations. CSAs, sub-providers and specialty providers must obtain DBH authorization prior to delivery of services listed below. All CSA's, sub-providers and specialty providers must utilize the DLA-20 as part of determining the level of care for any adult consumer recommended to receive the following services:
 - a. ACT (DLA-20 score of 4.0 and below);
 - b. Rehabilitation Day Services (DLA-20 score of 5.0 and below);
 - c. Mental Health Community Residential Facility, (DLA-20 Score of 3.0 and below);
 - d. Intensive Day Treatment (DLA-20 Score of 3.0 and below);
 - e. Crisis Beds (DLA-20 Score of 4.0 and below); and
 - f. Partial Hospitalization (DLA-20 Score of 4.0 and below).

6d. Training

- a. To utilize the DLA-20, each DBH, CSA, sub-provider and specialty provider staff member who will be conducting DLA-20 assessments must complete a DBHapproved training.
- b. CSAs, sub-providers and specialty providers must track each staff member's completion of the DLA-20 training through DBH's Learning Management System.

c. To access the DLA-20 electronically, each CSA, sub-provider and specialty provider shall contact their electronic health record company and request access to the DLA-20 tool.

7. Exhibits.

Exhibit 1 - Daily Living Activities: Adult Mental Health

Exhibit 2 - Daily Living Activities Anchors

Exhibit 3 - DLA-20 Scoring Rules

Approved by:

Barbara J. Bazron, Ph.D. Director, DBH

(Signature)

02/13/2023

(Date)

Consumer Name:		<u>.</u>		Daily Living A							
Comment		<u> </u>				S. Presmanes, M					ıD.
Consumer ID:			cor	tructions: Using the sumer independen	tly per	rformed or mana	aged each	of the	20 Act	tivities	of
consumer's level of	functioning varied	rate the lower so	Da:	ily Living (ADLs)	in the	community dur	ing the la	st 30 da	ays. If	the	ıı.
as those due to menta	al impairments. Do	not consider enviror	mental	Unitations (e.g. "no id	me ava	inictioning que	to pnysi	cai iim	itations	as wel	11
"within normal limits" (W	NL) for that activity. 20	0 scores are always a	pplical	ble & valid for Average	Comp	osite DLA-20 to cor	relate with	severity	naicate r of illness	unctioniz	ng ST)
1 20 1	000 Z 000	43 3		4 1		5 (WNL)	[6 (W	NL)	T	7 (WNL	.)
None of the time; extremely severe	A little of the time; severe impairment	Occasionally, seri- to moderately seve		Some of the time;		d bit of the time;	Most of t			the time	,
impairment of	or problems in	impairment or prol		moderate impairment or	challer	mpairment, nge or problems	strength v			endently	¥.
problems in	functioning,	in functioning,		problems in	in fund	ctioning,	or proble			ged DLA nunity no	
functioning; pervasive level of	extensive level of	moderate level of		functioning; low	moder	ate level of	functioni	ng, low	impai	rment or	-
continuous paid	continuous paid supports needed	continuous paid supports needed		level of continuous paid		ittent paid rts needed	level of	أدائمهم	proble		
supports needed	bupper is needed	supports needed		supports needed	suppoi	its needed	intermitte Supports i			oning rec upports	quiring
ACTIVITIES	Examples of scori	ing strengths as V	VNL E	behaviors (Scores 5-	7)	Date		R2	R3	R4	R5
1. Health	Takes care of healt	th issues, manages	mood	ls, infections; takes m	edicat	ion as prescribed:	:	1-12	100	No. 1	105
Practices	follows up on med	ical appointments								1	
2. Housing Stability, Maintenance	Maintains stable he to maintenance if I	ousing; organizes iving with others	posses	ssions, cleans, abides	by rule	es and contributes	5				
3. Communication			/feelir	ngs; makes wishes kn	ow eff	fectively.	-	 	2		
4. Safety	Safely moves abou	t community – ad	equate	vision, hearing, mak	es safe	decisions. Safel	ly				
5. Managing	Follows regular sci	hedule for bedtime	. wak	e-up, meal times, rare	elv taro	ly or absent for	+-	 			
Time	work, day program	is, appointments, s	chedu	led activities.							
6. Managing Money				ce of funds); controls	spend	ing habits.					
7. Nutrition	Eats at least 2 basis			•			_				
8. Problem Solving	Resolves basic professions.	blems of daily livi	ng, as	ks questions for clari	ty and	setting					
9. Family		mily positive relat	ionshi	ips as parent, sibling,	child	significant other				<u> </u>	
Relationships	family member.										
10. Alcohol/Drug Use	Avoids abuse or ab	stains from alcoho	ol/drug	gs, cigarettes; underst	ands s	igns and sympton	ns				
11. Leisure	Relaxes with a vari	ety of activities; a	ttends	participates in sports	or per	rforming arts		 			
	events; reads news; arts/crafts; goes to	papers, magazines	, book	s; recreational games	with o	others; involved					
12. Community			help g	roups, telephone, pub	lic tra	nsportation	-	-			
Resources	religious organizati	ions, shopping.									
13. Social Network	Gets along with frie			•							
14. Sexuality	of others, practices	safe sex or abstair	15.	rtable with gender, re			ts				
15. Productivity	Independently work support.	king, volunteering	, home	emaking, or learning	skills f	or financial self-					
16. Coping Skills	Knows about nature	e of disability/illne	ess, pro	obable limitations, an	d sym	ptoms of relapse;	-				
	behaviors that cause	e relapse or make	situati	on/condition worse;	makes	plans and uses					
	options for coping,	improving, prever	iting r	elapse, restoring feeli	ings of	self-worth,			ĺ		
17. Behavior	Complies with com		. مائده ما	- <i>i</i> 1						<u> </u>	
Norms	controls dangerous,	violent, aggressiv	e, biza	n/parole, court require arre, or nuisance beha	ements aviors;	s, if applicable; respects rights of	f				
18. Personal Hygiene	others. Cares for personal of	cleanliness, such a	s bath	ing, brushing teeth			+			\longrightarrow	
19. Grooming	Cares for hair, hand				274		+			\longrightarrow	
20. Dress				propriate for weather	ioh r	and other	_			\longrightarrow	
	activities; clothing i	is generally neat a	nd inta	ect.	, 100, 6	and other					
Scoring Instructions: S	tep 1. Add 20 scores	from current Rev	iew co	olumn (R1-R5). Step	2.	Sum N=20 (max.140))			$\overline{}$	$\overline{}$
Divide sum by number keep 2 digits, No N/A, V	of activities actually	rated to obtain ave	rage I	DLA-20 composite so	core-	Avg. Composite			-+	\dashv	
Functioning (mGAF) mu	Itiply the average DLA s	score by 10 (Standar	d Error	range +/-3 noints). Co	nsult	DLA-20 Est. count DSM-				\longrightarrow	
the mGAF https://www.d	lcf, state.fl.us/programs	/samh/mentalhealt	h/mgaf	and for the DSM-5 cou	int of	# disturbances	3				
serious disturbances. Step	Consult the crosswa	ak for the ICD-10 Se	verity	of timess index (SI).		Severity Index for ICD-10 Modifier				$\neg \uparrow$	
-						- ON- 14 WIDGING		$\overline{}$			

Crosswalk from Average Composite DLA-20 to ICD-10 4th digit S1 & DSM-5 # serious disturbances: DLA-20 > 6.00 = Adequate Independence, no significant or slight impairment in functioning

ICD 10 4th digit modifier - 0 Severity - No difficulty means the person has no problem.

DLA-20: 5.10- 6.0 = Mild impairments, minimal interruptions in recovery

ICD 10 4th digit modifier = 1 Severity - Mild difficulty means problem is present less than 25 percent of the time with intensity a person can tolerate and happened rarely over the last 30 days.

DSM-5 # symptoms: few and mild (mGAF tallies)

WHODAS 2.0 Self-report average score <=2

LOCUS (generally crosswalks) Level 1

DLA-20: 4.10- 5.0 = Moderate impairment in functioning

ICD 10 4th digit modifier = 2 Severity - Moderate difficulty means problem is present less than 50 percent of the time with moderate intensity that is interfering in the persons' day-to-day life and happened occasionally over the last 30 days.

DSM-5 counts of serious symptoms: 1-3 serious symptoms/disturbances

WHODAS 2.0 Self-report average score 3

LOCUS (generally crosswalks) Level 2 or ASAM Level 1

DLA-20: 3.10- 4.0 = Serious impairments in functioning

ICD 10 4th digit modifier = 3 Severity - Serious difficulty means problem is present more than 50 percent of the time with severe intensity that is partially disrupting the persons' day-to-day life and happened frequently over the last 30 days.

DSM-5 counts of serious symptoms: 4-6 serious symptoms/disturbances

WHODAS 2.0 Self-report average score 4

LOCUS (generally crosswalks) Level 3, ASAM 2

DLA-20: 2.10- 3.0 = Severe impairments in functioning

ICD 10 4th digit modifier =3 Severity - Severe difficulty means problem is present more than 75 percent of the time with severe intensity disrupting the persons' day-to-day life and happened frequently over the last 30 days.

DSM-5 counts of serious symptoms: 7-10 serious disturbances

WHODAS 2.0 Self-report score >4 is severe distress, high risk

LOCUS (generally crosswalks) Level 4

DLA-20: <= 2.0 Extremely severe impairments in functioning

ICD10 4th digit modifier = 4 Severity - Extremely severe indicates complete difficulty, a problem that is present more than 95 percent of the time with intensity that is totally disrupting the persons' day-to-day life and happened every day over the last 30 days.

Modified Global Assessment of Functioning (mGAF) identifies intensely high-risk symptoms = 11+

(https://www.dcf.state.fl.us/programs/samh/mentalhealth/mgaf.pdf)

DLA-20© Scoring Rules

- Assess level of functioning or impairment compared to the entire population.
- Evaluation is based on the past 30 days.
- If functioning varied in the last 30 days, rate the lowest score on the more frequent pattern of behavioral responses to symptoms.
- Once you pick a number, look at the rating below to make sure a lower rating is not more accurate. Continue this until the most accurate rating is found.
- If you cannot decide between two scores, always choose the lower score.
- Consider impairments in functioning due to physical limitations as well as those due to mental impairments. Assess needs.
- Do not consider environmental limitations (e.g. "no jobs available").
- Must address at least 15 items

The score is <u>not</u> necessarily correlated with the client's self-reported functioning as research shows —trust your own assessment of current behaviors, known and reported, and the anchors defining strengths & weaknesses compared to general population (not client population).

,			SECTIVE STATES				
meds mealtimes		others.	e.g., prompts	constant direction	by others	direction of others.	nrs. average/night)
managing sleep.	direction of others.	routine direction of	regular direction,	might need/use	extensive direction	ume; pervasive	-opulial sleep /-9
directive in	reliance on	benefits from	routines; uses	sieep, mealtimes;	Of receives	illanagement of	=ontimal class 70
wellness; self-	minimal prompts or	management,	disruptions in	or medications,	management, needs	management of	-direction (e.g. a.7
for health and	management,	effective time	effective,	foutine management	III TOUGHE LILIE	(missing) No	of sleen time self
Optimal routines	Adequate time	Moderately	Marginally	Limited, e.g., poor	Marked limitations	routines or MIA	Rate management
others.	friends, others	helping persons).	monitoring.	supervision.	supervision.	Uich wielt -L	S-Managing Times
assistance from	family, neighbors,	home visits by	assistance or	limitations, needs	level of continuous	level of continuous	homicidal etc.)
significant	minimal assistance,	care-givers (e.g.	from regular	abused, cognitive	needs/nas extensive	level of continuous	(e n not suicidal
self with no	protection with	benefits fm routine	protective, benefits	e.g., abusive or	norde (community;	requires periodical	nerconal cafety
alert, takes care of	Adequate self-	good decisions,	aware and self-	decisions; "at risk"	in safety around	other modern	maintenance of
Optimally safe;	Safe decisions;	Moderately safe,	Marginally safe,	Makes unsafe	Marked limitations	danger to colf or	A_Pote current
assistance needed.	assistance		regular assistance.	rely on assistance.	on assistance.		Car
others, no	minimal need for	routine assistance	with others, uses	with others & may	others, dependent	aependence	Communication
nonverbally with	with others,	with others, using	communicating	communicating	antagonistic with	pervasive	nonverbal
verbally.	communicating	communicating	effectiveness in	effectiveness in	blunted or	communicative,	cirective veroal and
effectiveness	effective in	effective in	problems, marginal	nonverbal	dystunctional,	risk threats or non-	3-Kate currently
Optimal	Adequately	Moderately	Not clear about	Limited verbal or	Communication is	Not effective: high	2 Pate munication:
	,		household.	maintenance.	residences.		
	friends, others).	household by self.	maintain stable	help in household	protective	sufficient.	
6	from family,	mostly maintains	assistance to	may occasionally	24/7 supported or	household, not self-	household.
support in housing.	intermittent support	helping persons),	relies on regular	or self-help home,	assistance, likely in	not manage	management or
assistance or public	housing (e.g.	home visits by	sufficient, e.g.,	assistance, private	uses constant	dependent - does	along in residence,
with no significant	based, independent	assistance, (e.g.	marginally self-	relies on respite,	street, needs or	environment,	maintaining/getting
independent living	in community	routine, low level	may be only	sufficiency; e.g.,	sometimes on	protective	mying independent,
community based,	minimal assistance	private place with	inadequate or s/he	Limited self-	housing, e.g.,	supervision in	Sufficiency for
Self-sufficient in	sufficient with	independent,	housing may be	housing, unstable,	maintaining stable	relies on pervasive	2-Nate current seri-
independence:	independence: self-	sufficient in	housing but	community	in keeping or	threat, needs or	o Determinent
Optimal	Adequate	Moderately self-	Stable community	Dysfunctional in	Marked limitations	Health endangering	Housing
in self care.	persons.	residences.	health assistance	health care.	to self/other	stays in crisis, jail)	management
assistance needed	other helping	private or self-help	low level mental	continuous help for	concern for danger	multiple or lengthy	medications, illness
decisions no	family, friends.	helping persons, in	requires scheduled	issues prompting	impairments,	interventions (e.g.:	managing moods,
health care	assistance ok from	or home visits by	moderate problem;	maybe physical	very severe mental	requires pervasive	(MH), including
status: makes good	support, some	routine assistance	managing moods is	mental status,	extensive help for	in reality,	mental health
nhysical & mental	meds - minimal	intermittent, some	or prescriptions,	moods, symptoms,	complications,	evidence of breaks	physical (PH) and
taking care of	with treatment	moods but relies on	with health issues	impairments in	have physical	MH: No self-care,	self-care for
independent in	care, compliant	sufficient, manages	and compliance	compliance, serious	in self-care &may	to self/other due to	1-Rate independent
Ontimally	Independent self-	Moderately self-	Marginal self-care	Limited self-care &	Marked limitations	Evidence of danger	Health Practices:
No support	low level supports	intermittent support	support for DLA	intense supports	extensive supports	pervasive supports	ANCHORS
independence with	impairment, needs	impairment,	routine, frequent	serious symptoms;	impairment, needs	impairment, needs	(DLA-201M)
optimal	Intermittent mild	Mild functional	impairment;	impairment with	functional	severe functional	ACTIVITIES
7- WNL-Strength	6- WNL-Strength	5- WNL/Strength	4- Moderate	3- Serious	2- Severe	1- Extremely	DAILY LIVING

DLA20™ requires training from MTMServices.org through NCBH.com

MTMSERVICES

Authors: R.Scott, PhD and W.Presmanes, MEd., M.A

retationships		significant other	superficial, unreliable).	family or significant others	or physical communication)	withdrawn, often rejected by others.	of family relationship
contributes to these	agmirant one	family member or	infrequent	participation with	destructive verbal	or severe abuse,	friends) and quality
contributes to these	significant other	with at least one	often stressed or	communication or	dependency or	physical aggression	(separate from
others: assetiusly	members or	close relationshin	relationships are	no positive	duress, unwanted	often leading to	interactions,
family/ significant	one or more family	continuing and	relationships (i.e.	relationships, often	family (e.g. routine	deviant behaviors	9-Rate family
relationship with	relationship with	effective	functional family	family	relationships within	relationships or	Relationships:
Docition	A dequate personal	Moderately	Marginally	Dysfunctional	Very dysfunctional	Dysfunctional	Family
		q	problem solving.	problem solving.	problem solving.	living problems	
		decision making.	treatment-related	treatment related	participation in	others handle daily	
		in treatment-related	participates in	participation in	minimal	problem solving;	
others	from others.	others, compliant	regular assistance,	assistance, limited	supervision,	no participation in	
assistance from	minimal assistance	assistance from	needs or uses	or relies on	constant	endangering threat,	gulviig
with no significant	solving with	with routine	solving, often	solving; often needs	often involving	approaching health	problems of daily
problem solving	day problem	problem solving	day problem	day needs, problem	problem solving,	needs, clearly	management of
independent	sufficient in day to	sufficient in	sufficient in day to	in meeting day to	limitations in	solving, pervasive	o-Kate independent
Optimal and	Adequately self-	Moderately self-	Marginally self-	Serious limitations	Very severe	No problem	r robtem Solving:
preparation.		& preparation.	preparation.	preparation.	plans, preparation.		Ducklam Calvina
shopping, and	and preparation.	planning, shopping	shopping, and	shopping,	nutritional meal		needs
meal planning,	planning, shopping,	participates in meal	meal planning,	in meal plans,	supervision; no	preparation.	for putritional
others needed for	others in meal	assistance, but	participation in	limited participation	involves constant	snopping, and	hans plane apply
assistance from	assistance from	intermittent	assistance, some	what is available,	assistance, often	mear pranning,	independently
with no significant	with minimal	benefits from	2x/day; often uses	others; may eat	continuous	participation in	prescription
nutritional needs.	nutritional needs	needs 2x/day,	nutritional needs	assistance from	dependence on	needs, no	diet supporting
managing	managing	meeting nutritional	managing	continuous	substantial	manage nutritional	or consuming basic
independence in	independent in	independent in	independence	needs or depends on	limitations,	concerns; Does not	Kate current report
Optimal	Adequately	Moderately	Marginal	Serious limitations,	Very severe dietary	High risk dietary	7-Nutrition:
		managing money.	rent & expenses.	finances	managing money.		
	assistance of others	participation in	paying day to day	managing personal	spending or		
	balances or	others, significant	participates in	participation in	participation in	institutional help.	
	checks and	assistance from	help, moderately	minimal	limited \$, minimal	public or	
personal initiatives	with minimal	min. intermittent	finances; often uses	Dependent or	supervision, very	dependence on	
nersonal finances	personal finance	public assistance),	public assisted	payee for rent);	payees or total	finances, total	personal finances
independent and	independent.	finance (minimum	income, benefits or	(may have rep.	often involves rep	or public assisted	management of
managing	managing	managing personal	managing personal	financial assistance	personal finances;	managing personal	Kate independent
independence in	independent in	independent in	independent in	seek/manage public	in management of	involvement in	Money:
Ontimal	Adequately	Moderately	Marginally	Requires help to	Marked limitations	No income & no	6-Managing
No support	low level supports	intermittent support	support for DLA	intense supports	extensive supports	pervasive supports	ANCHURS
independence with	impairment, needs	impairment,	routine, frequent	serious symptoms;	impairment, needs	impairment, needs	(DLA-201M)
ontimal	Intermittent mild	Mild functional	impairment;	impairment with	functional	severe functional	ACTIVITIES
7- WNI Strength	6- WZL-Strength	U- WNL Strength	4- Moderate	Shorrag -	1 0000	•	

| behaviors | safe & appropriate | health, sexually | physical sexual | 14-Rate mental & | health: | Sexuality/Sexual | | friends not family) | nerwork (e.g. close | immediate social | interactions with | 13-Rate quality of
 | Social Network: | transportation. | services, shopping, | health & social | independent use of | 12-Rate current | Resources:
 | Community | leisure activities. | participation in | Rate independent | 11-Leisure:
 | abstinence | alcohol/drug | maintenance of | cigarettes; or
 | including | addictive drugs | control with | 10-Rate self- | Alcohol/Drug Use:
 | ANCHORS | (DLA-201m) | ACHVITIES | DAILY LIVING |
|----------------------|---|--|--|---|--|--|--|--|--|---|--
---|--|--|---|--|--
--	--	--	--
--	--	--	--
--	--	--	--
--	---	--	---
protective	continuous	others prompts	danger to self or
 | Extremely | necessary help. | adamantly refuses | to gain access OR | reliance on helpers | resources; chronic | of community
 | No independent use | leisure activities. | participation in | independent | Dependent -
No | | | control | abuse, no self-
 | pervasive substance | and safety threats - | to imminent health | dependence leading | Current abuse or
 | pervasive supports | impairment, needs | severe functional | 1- Extremely |
| high risk to self or | interventions due to | level of protective | prompts extensive | self-care, likely | in sexual health & | Marked limitations | behaviors) | destructive | dependency or | excessive | relationships (e.g. | in social network
 | Marked limitations | reliant on helpers. | resources, very | community | independent with | unable to be | dependence OR
 | Inappropriate | without help. | leisure of any kind | participation in | Dependent -
min. | | self-control | extremely limited | in treatment;
 | does not participate | abuse problem, | deny substance | dependence, may | Current abuse or
 | extensive supports | impairment, needs | functional | 2- Severe |
| supervision if risks | interventions, even | prompt extra care, | concerns may | health self-care; risk | limited sexual | Behaviors indicate | | and withdraws | isolated or avoids | friendships, socially | often no significant | interpersonally,
 | Limited | help to gain access. | resources, reliant on | community | independence with | w/o help; Limited | appropriate supports
 | Does not seek | leisure activities. | participation in | independent | Limited
interests or | | with treatment plan | control, struggles | shows limited self-
 | abuse problem but | serious substance | acknowledges | dependence, | Current abuse or
 | intense supports | serious symptoms; | impairment with | 3- Serious |
| sexual behavior. | personal or others | understanding of | heath; minimal | care of sexual | sufficient in self- | Marginally | strained) | unreliable, | often minimal, | friendships are | others (i.e. | functioning with
 | Marginal | vocational resource | educational, | recreational, | to gain access to | occasional reliance | independent,
 | Marginally | participation. | activity | independent leisure | Marginally
 | | cigarettes, drugs. | over alcohol, | moderate success
 | treatment, | compliant with | dependence, | problem with use, | Current moderate
 | support for DLA | routine, frequent | impairment; | 4- Moderate |
| as age appropriate. | guidance of others | helpful education, | with routinely | health and self-care | sufficient in sexual | Moderately | | friend | with at least one | close relationship | continuing and | effective
 | Moderately | access | reliance gaining | intermittent | resources, | of community | independent in use
 | Moderately | participation. | activity | independent leisure | Moderately
 | sustain success. | to continuously | support, treatment | help, information,
 | of risks and seeking | adequately aware | abuse/dependence, | recent history of | No current use but
 | intermittent support | impairment, | Mild functional | 5- WNL/Strength |
| from others | minimal guidance | only expected and | respect, asking | & health, self- | around sexual self | Adequate self-care | | | | one or more friends | relationships with | interpersonal
 | Adequate | (| gaining access. | need for help in | resources, minimal | community | independent use of
 | Adequate | activity. | least one leisure | independent in at | Adequately
 | | | related issue | substance abuse-
 | have had history of | help groups. May | Abstinent with self | smoking or | Safe use, not
 | low level supports | impairment, needs | Intermittent mild | 6- WNL-Strength |
| | others needed. | guidance from | for partner, no | respect and respect | self-care, self | Optimal sexual | contributions | assertively | independent with | friends; optimally | one or more | relationship with
 | Positive | access. | help in gaining | significant need for | resources, no | community | independent use of
 | Optimal | activities. | 2 or more leisure | independence with | Optimal
interests. | | | | substances:
 | control with | and Optimal self- | related problems | substance abuse- | No history of
 | No support | independence with | optimal | 7- WNL-Strength |
| | <u>protective</u> <u>high risk to self or</u> supervision if risks sexual behavior, as age appropriate. from others | continuous interventions due to interventions, even personal or others guidance of others minimal guidance protective high risk to self or supervision if risks sexual behavior, as age appropriate. from others | ropriate continuous level of protective prompt extra care, propriate continuous interventions due to interventions, even protective high risk to self or supervision if risks sexual behavior, as age appropriate from others. | danger to self or prompts extensive concerns may others prompts level of protective continuous interventions due to protective high risk to self or prompt extra care, continuous interventions due to protective high risk to self or prompt extra care, continuous interventions, even personal or others guidance of others guidance of others as age appropriate. From others | pervasive high risk, self-care, likely danger to self or others prompts extensive continuous of protective prompts due to protective bigh risk to self or others prompts concerns may others prompts due to prompt extra care, bigh risk to self or others prompts concerns may others prompts due to prompt extra care, interventions, even personal or others guidance of others as age appropriate. | dysfunctional, in sexual health & limited sexual sufficient in self-sufficient in self-sufficient in self-sufficient in sexual self-care; risk danger to self or others prompts extensive continuous interventions due to protective bigh risk to self or others prompts with routinely prompt extra care, interventions, even protective bigh risk to self or supervision if risks sexual behavior, as age appropriate. | Severely Marked limitations due to dysfunctional, enterventions understeive prompts extensive continuous protective professive bigh risk to self or protective professive bigh risk to self or protective professive daysfunctional, in sexual health & limited sexual sufficient in self-sufficient in sexual self-served from others around sexual self-served with routinely respect, asking understanding of personal or others as age appropriate. From others as age appropriate. | Severely Marked limitations Severely dysfunctional, pervasive high risk, others prompts continuous protective Marked limitations Behaviors indicate limited sexual self-care; risk care of sexual concerns may others prompts protective Marginally sufficient in self-sural sufficient in self-sexual sufficient in self-sural sufficient in self-sexual sufficient in self-sexual sufficient in self-sexual self care of sexual health and self-care with routinely respect, asking understanding of helpful education, only expected and seg appropriate. Severely Marked limitations Behaviors indicate Imited sexual self-care sufficient in self-sexual self-care with routinely respect, asking only expected and seg appropriate. Severely Moderately Adequate self-care with routinely respect, asking only expected and guidance of others minimal guidance of others as age appropriate. Severely Moderately Adequate self-care sufficient in self-sexual around sexual self with routinely respect, asking only expected and sexual self sexual with routinely respect, asking only expected and sexual self sexual self-sexual self-sexual with routinely respect, asking only expected and sexual self sexual self-sexual with routinely respect, asking only expected and sexual self-sexual self-sexual self-sexual self-sexual with routinely respect, asking only expected and sexual self-sexual with routinely respect, asking only expected and sexual self-sexual self-sexual with routinely respect, asking only expected and sexual self-sexual with routinely respect, asking only expected and sexual self-sexual self-sexual self-sexual self-sexual self-sexual with routinely respect, asking only expected and sexual self-sexual self-sexua | police or severely destructive withdrawn) behaviors) Severely dysfunctional, danger to self or others prompts continuous protective protective professive bigh risk to self or protective professive bigh risk to self or professive behavior, as age appropriate. Adequate self-care strained) Marked limitations Behaviors indicate bimited sexual self-care sufficient in self-sufficient i | aggression involves dependency or police or severely destructive withdrawn) behaviors) Severely dysfunctional, pervasive high risk, others prompts continuous protective prompt extra care, personal or others prompts withdraws destructive prompt extra care, personal or others sexual behavior, promptiate or self or protective prompt extra care, personal or others ground seven personal or others ground sexual behavior, as age appropriate. | aggression involves aggression involves dependency or police or severely withdrawn) Severely dysfunctional, pervasive high risk, continuous police or severely withdrawn) Marked limitations danger to self or continuous protective bigh risk to self or protective mminent physical excessive friendships, socially filendships are close relationship with at least one siolated or avoids often minimal, with at least one friends with at least one friends with at least one friends with at least one friendships are close relationship one or more friends with at least one friendships are close relationship one or more friends with at least one friendships are close relationship one or more friends with at least one friendships are close relationship one or more friends with at least one friendships are close relationship with at least one friends with at least one friendships are close relationship with at least one friends with at least one friends with at least one friendships, socially friendships are close relationship with at least one friends with at least one friends with at least one friends strained) Moderately sufficient in seural health and self-care with routinely respect, asking only expected and minimal guidance of others as age appropriate. from others as age appropriate. | relationships (i.e. relationships (e.g. imminent physical aggression involves aggression involves dependency or police or severely withdrawn) Severely dysfunctional, pervasive high risk, continuous protective interventions due to protective imminent physical excessive friendships, socially friendships are close relationship one or more friends often minimal, with at least one dependency or isolated or avoids often minimal, with at least one dependency or isolated or avoids often minimal, with at least one of more friends often minimal, with at least one dependency or isolated or avoids often minimal, with at least one friends often minimal, with at least one often minimal, with at least one often minimal, with at least one friends often minimal, with at least one of more friends often minimal, with at least one of more friends often minimal, with at least one of more friends of the minimal, with at least one of more friends of the minimal, with at least one often minimal, with at least one of one or more friends of the minimal, with at least one of the | dysfunctional relationships (i.e. relationships (e.g. imminent physical excessive aggression involves dependency or police or severely withdrawn) Severely Marked limitations daysfunctional, danger to self or continuous protective minimal protective dysfunctional in social network relationships (i.e. often no significant friendships, socially, friendships, socially friendships are dependency or siolated or avoids withdraws unreliable, with at least one destructive strained) Marginally Severely Marginally sufficient in sexual health and self-care of sexual concerns may others on personal or others ground sexual self miterventions, even promptis continuous Diotective Marginally sufficient in sexual health and self-care with routinely respect, asking only expected and minimal guidance of others minimal guidance of others. 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Extremely dysfunctional imminent physical excessive aggression involves dependency or dysfunctional, police or severely dysfunctional, pervasive high risk oself or protective interventions due to protective interventions due to protective interventions intervention intervention intervention intervention int | to gain access OR community adamantly refuses necessary help. Extremely dysfunctional imminent physical excessive dysfunctional, meliant on helpers. imminent physical excessive dysfunctional, police or severely dysfunctional, pervasive high risk, danger to self or others prompts continuous to gain access relation on helpers. Limited offen no significant of relationships (e.g. offen no significant of relationships with relationships (e.g. offen no significant of severely withdrawn) Severely Marked limitations Interpersonally, offen minimal, with and self-care are of sexual behavior, on thers prompts with resource access Limited sources. Limited sourcess. Limited sourcess. Limited sourcess. Limited sourcess. Vocational, resource access Marginally friendships are close relationship one or more friends one or more friends with at least one with at least one unreliable, friend one or more friends offen minimal, with at least one with at least one unreliable, friend offer minimal, with at least one with at least one unreliable, friend offen minimal, with at least one with at least one sufficient in self-care sufficient in self-care around sexual self-care around sexual self-care with routinely respect, asking only expected and minimal guidance of others protective briendships, socially friendships are continuing and withdraws unreliable, friend offen minimal, with at least one with at least one with at least one unreliable, friend offen minimal, with at least one with at least one with at least one with at least one unreliable, friend offen minimal, with at least one with at least one with at least one with at least one with a least one of one or more friends offen minimal, with at least one of one or more friends offen minimal, with at least one of one or more friends offen minimal, with at least one of one or more friends offen minimal, with and self-care friends offen minimal, with at least one of one or more friends offen minimal, with at least one of one or more fr | reliance on helpers community rogain access OR community resources, reliant on helpers. 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Treliance gainin | of community resources; chronic resources; chronic resources; chronic resources; chronic resources; chronic resources; chronic relations on helpers relationships (i.e. relationships (e.g. relationships (e.g. police or severely dysfunctional, pervasive high risk, pervasive high risk, continuous relations due to protective relations destrictive relations due to protective relations resources; chronic relationed with relationed with resources, reliant on recessary help. resources, very resources, reliant on resources, very resources, reliant on recreational, recliance gaining resources, minimal dependent in use of community resources, minimal resources, minimal recreational, relationships (recreational, relationships are relationships are relationships are relationships with routinely resources, minimal recreational, reliance gaining recressive relationships (recreately chert interpersonally, ofhern no significant friendships are close relationship continuing and continuing and continuing and relationships with relationships resources, minimal reliance resources, minimal reliance resources, minimal reliance resources, minimal reliance access Marginal Moderately Adequate relationship resources resources, minimal reliance resources, minimal reliance resources, minimal reliance resources resources, minimal reliance resources resources, minimal reliance resou | No independent use lnappropriate of community of community resources; chronic unable to be made net with to gain access OR adamantly refuses reliant on helpers. Independence with to gain access OR adamantly refuses reliant on helpers. Independence with to gain access to recources, minimal reformely refuses reliant on helpers. Extremely Marked limitations lependency or segretly withdrawn) Severely Marked limitations lependence with relationships (e.g. often no significant in sexual health & behaviors) Marked limitations limitations danger to self or others prompts extensive concerns may protective continuous Marked limitations limitations limited sexual self-care; risk concerns may understanding of behavior, age age appropriate. Marginally Moderately recational, reliance gaining access. Marginally Moderately recational, reliance gaining access. Marginally Moderately recational, reclational, reclational, reliance gaining access. Marginally Moderately recational, reclational, reliance gaining access. Marginally Moderately Moderately Moderately Adequate independent use of community recational, reliance gaining access to others in reclationships (e.g. often minimal, with at least one with at least one friends with at least one of more friends with at least one with at least one friends with at least one of with at least one of with at least one friends with at least one with at least one of with at least one friends with at least one with at least one of with at least one of with at least one of with at least one friends with a least one or more friends with a least one of with a least on | leisure activities. without help. leisure activities. participation. participate supports participation. partic | Participation in leisure of any kind participation in leisure activities. vithout help. leisure activities. participation. Par | independent in the participation in leisure of any kind participation. No independent use Inappropriate Does not seek of community in the pendent leisure activity. No independent use Inappropriate Does not seek of community in the pendent with of gain access to to gain access to to gain access to independent with to gain access to independent in use of community resources, when the personally independent in use of community recreational, recreational, recreational, recreational, reliance gaining access. Extremely dysfunctional in social network intended dysfunctions police or severely dysfunctional, pervasive high risk, adamant provides aggression involves dependency or withdrawn) Severely Severely dysfunctional, interpersonal prompts extensive continuous interpersonal prompts extensive continuous interpersonal prompts extensive continuous interpersonal provides independent in use of community recourses, minimal elisure activity. Marginal dependent, independent in use of community recourses, minimal eliston. Reflations provides independent with to gain access to to gain access to recourses, minimal elistons independent, independent in use of community recommunity recommunity cocasional reliance of others prompts extensive prompts extensive concerns may understanding of protective prompt extra care, understanding of with routinely only expected and continuous in the provision if risks sexual behavior. Provided and crivity promptices in activity and provides appropriate in access to to gain access to recourses, minimal activity recourses, minimal access. Marginally docation, provided and continuing and interpetations dependent use of community recourses, minimal access. Noderately Adequate effective interpetations dependent in access to to gain access. Marginal Provided and provided and provided and preliance of others indep | Dependent - No Dependent - min. Imited interests or independent leisure independent leisure participation in leisure of any kind leisure activities. No independent use of community resources; chronic unable to be independent with to gain access OR community adamantly refuses reliance on helpers. necessary help. Extremely Extremely Marked limitations Extremely Moreasive dependent use dependence or resources, reliant on helpers independent in social network relationships (e.g. dependency or police or severely danger to self or others prompts Marked limitations Extremely Marked limitations Does not seek appropriate supports independent, with drawn) Marginally Marginally Marginally Marginally Marginally Moderately Marginally Moderately Marginally Moderately Marginally Moderately Marginally Moderately M | Dependent - No Dependent - min. Limited interests or Marginally Moderately Moderatel | Dependent - No Dependent - No Dependent - Mo Independent Independe | control extremely limited self-control self-care, likely danger to self-or options and self-care, likely self-care, likely self-care, likely continuous participation in participation in leisure of any kind participation in leisure of any kind participation in leisure activities. Dependent - No Dependent - min. Imidependent supports independent leisure activities. Participation in leisure activities of community activity independent leisure activity independent leisure activity independent leisure activity independent leisure activity activity independent leisure activity independent leisure activity independent leisure activity independent leisure activity. Participation. Pa | abuse, no self- control in treatment; limited control self-control Dependent self-control Dependent No Noderately No | pervasive substance does not participate abuse, no self- control stows limited self- control stows limited self- control stows limited self- control stows limited self- control self-control self-control self-care shows limited self- control stows limited self- control self-control self- control self-care support, treatment related sisue, continuously sustain success. Support, treatment related self- continuously sustain success. Support, treatment related self- control self-care support, treatment related sisue, continuously sustain success. Support, treatment related support, treatment related sisue, continuously sustain success. Support, treatment, continuously sustain success. Support, treatment, related sisue, continuously sustain success. Support, treatment, related sisue, continuously sustain success. Marginally sustain success. Marginally suppropriate supports independent leisure independent in use of the participation. Marginally sustain success. Marginally sustain success. Madependent, madependent ties undependent leisure participation. Moderately sustain success. Madequate independent in use of the participation. Moderately substance abuse- continuously sustain success. Madequate independent in use of the participation. Madepandent leisure activity. Moderately substance abuse- continuously sustain success. Madependent leisure least one leisure participation. Moderately substance abuse- continuously sustain success. Madependent leisure independent in use cirvity. Moderately substance abuse- carivity sustain success. Madependent leisure least one leisure elativity. Moderately s | and safety threats: abuse problem, belty groups. May pervasive substance of each oparticipate abuse, no self-control Dependent - No independent in participation in participat | and safety threats - abuse problem, and safety threats - abuse problem but abuse, no self. control self-control extremely limited control structurent; control self-control extremely limited self-control self-control extremely limited self-control self-control extremely limited self-control self-control self-control extremely limited self-control self-co | dependence leading dependence, may dependence, dependence, acknowledges and safety threats: and safety threats: abuse problem, but shows initiated self-control buse, no self-control control buse, no self-control control C | control current abuse or dependence, may dependence, and safety threats - abuse problem, and safety threats - abuse problem, serious substance control abuse, no self- control stows limited self- control subsequent - No independent - No periodent - No independent - No independent - No independent - No independent use high resources, chronic unable to be relationships (i.e. Extremely instead systemethy in sexual health & excessive substance) Extremely instead control struggies of the file of the prostation in leisure activities. Without help. Varieties of community and constain access QR community and community refuses resources, chronic unable to be again access QR community refuses resources, retain on helpers relationships (i.e. periodency or optimuous) substance abuse-not activity and propriate supports independent in at recources, relation of helpers (often no significant police or severely destructive adjects) and propriate supports (independent in at resources, relationships are activities. Warginally (often no significant police or severely destructive and withdraws) Severely and severely destructive continuous by substance abuse-not accessive bight isks, social or interventions, even control in self-care, likely concern may be prompt extra care, understanding of interventions due to interventions fireds in the propertion in the propertio | ECurrent abuse or comma abuse or compliant with self-comma abuse problem. Dependent - No participation in leisure of any kind periodence of community dependent viet. Dependent - No independent viet. Dependent - No independent viet. Dependent - No participation in leisure of any kind participation in leisure activities. No independent viet. No independent viet. Dependent - No independent viet. Inappropriate of community dependence OR community dependence OR community dependence OR community resources, reliant on helpers independent viet. Extremely destinations dependency or reliant on helpers aggression involves dependency or policie or severely destinations. Extremely dependency or social network relationships (e.g. pervasive bigh risk, to self-care, like) behavior, in frisks and seeking adequate viet of policient viet. Dependent - No participation in leisure of any kind participation in participation in access or independent leisure independent in a activity. Dependent viet treatment plan city independent leisure independent in a activity. Dependent - No participation in participation in access or resources, reliant of the provisional, relationships (e.g. proporties of community resources, reliant of the provisional resources in participation in mempersonally. Extremely dependency or independent of access or reliance gaining access. Extremely dependency or independent deliant of the six or independent in use of frective prompts extensive independent in use of frective interpersonal reliance of others in a deficient in sevial participation in the participation in | pervasive supports extensive supports cupports extensive supports exte | impairment, needs inpairment, needs impairment, needs impairment, needs impairment, needs impairment, needs impairment, needs impairment, needs inpairment, needs impairment, needs impairment, needs impairment, needs interest supports culture, frequent impairment, needs impairment, needs impairment, needs impairment, needs impairment, needs impairment, needs inpairment, needs inpairment, needs inpairment, needs inpairment, needs impairment, needs impairment, needs impairment, needs inpairment, needs impairment, needs inpairment, needs interestive substance abuse problem with use, or or independent in at eleisure activity. Dependent in helpers independent with to gain access to community |

DLA20™ requires training from MTMServices.org through NCBH.com



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Optimal self- sufficiency in maintaining clean,	antionriate dress						
Optimal self- sufficiency in	0	annropriate dress	appropriate dress.	fitting in all weather	for weather, tasks.		personal bias
Optimal self- sufficiency in	maintaining clean	wears clean.	maintaining clean.	poor repair, ill	inappropriate dress	due to no self-care	appropriate w/o
Optimal self-	sufficiency in	support or help,	sufficient in	dress or dress is in	wearing unclean &	- high risk needs	clean, weather
וטעונווכ מסטוטנמווככ.	Adequate self-	With periodic	Marginally self-	Insufficient clean	Severe impairment,	Unclean, undressed	20-Dress: Rate
		- routine assistance.	-regular assistance.	impairments.	serious needs	needs	appearance
issues and no	assistance needed.	prompts or support	adequate grooming	indicate serious	self-grooming,	risk, pervasive	hands, general
grooming with no	grooming, minimal	grooming with	maintaining	observations	cleaned hair, hands,	indicative of high	care, groomed hair,
sufficiency in	sufficiency in	sufficient in	sufficient in	grooming, general	evident with poorly	grooming	Rate independent
Optimal self-	Adequate self-	Moderately self-	Marginally self-	Limited self-care in	Marked limitations	No personal	19-Grooming:
	assistance	assistance.	moderate support		endangered.	needs.	dental and oral care
issues.	infrequent	with routine	dental-oral health;	assistance.	hygiene; health	threat, pervasive	personal hygiene,
cleanliness; no	minimal prompts or	adequate hygiene	adequate hygiene,	or dependent on	care, personal	health endangering	management of
sufficient around	good hygiene;	maintaining	maintaining	oral hygiene, needs	teeth, or in self-	evidence indicates	independent
functioning, self-	in maintaining	sufficient in	sufficient in	teeth, poor personal,	problems with	personal hygiene;	Hygiene: Rate
Optimal hygiene	Adequate self-care	Moderately self-	Marginally self-	Limited self-care of	High risk or Severe	No self care - no	18-Personal
other participants			with multiple needs	by courts/parole	courts/parole.	justice sanctions)	rated <=4
interests, often with	activity	accord with needs	supports in accord	arrested, restricted	restrictions by	involve criminal	court involvement
or personal	recreational	public support in	public system	behaviors, e.g.,	may have serious	threatening, may	community, e.g.,
activities, hobbies	organization or	receive some	receive multiple	seriously impaired	helpers, neighbors;	disruptive or	interaction within
recreational	one community	interactions; may	courts/parole; may	interactions or	belligerent to	behavior is overtly	relationships,
church or clubs,	neighborhood, in	community	be compliant with	survival level	e.g., rejected or	behaviors (i.e.	community, social
in community,	resident	independent in	interactions; may	interactions,	deviant behaviors,	severely deviant	Rate extended
Positively interacts	interactions in	effective and	effective	and appropriate	demonstrates	from or evidences	Norms:
Independently and	Adequate positive	Moderately	Marginally	Limited successful	Often isolated or	Totally isolated	17-Behavioral
	restore confidence.	mechanisms	mechanisms.	medications)	environment.	supervision	
others.	and use options to	initiate coping	or initiate coping	over-the-counter	out of protective	pervasive	
assistance from	reduce stressors	assistance to	assistance to create	frequent use of	interventions, in or	needs/requires	
with no significant	knows self, acts to	routine reminders,	mechanisms; seeks	extra contacts,	constant	endangering threat,	mechanisms.
various stresses	minimal assistance,	mechanisms, WNL	of coping	interventions (e.g.	crises, involving	approach health	coping
mechanisms under	with only expected,	coping	knowledge and use	prompting regular	leading to relapses,	coping skills	and effective use of
use of coping	coping mechanisms	effective range of	effective	few coping skills	coping skills often	no mindful use of	Rate knowledge
Optimally effective	Effective use of	Moderately	Marginally	Ineffective use of	Negative use of	Pervasive stresses,	16-Coping skills:
	abilities.		settings)	making		productive.	employee, student)
•	all available	experience.	independent	employment, home	activities.	attempt to be	homemaker,
ease and efficiency.	often not applying	with limited skills,	sheltered or	school, independent	at home or in day	school; virtually no	wage earner,
school tasks with	home or school;	school; fluctuates	ability to work in	capabilities for	routine or structure	homemaking or	expected role (i.e.
homemaking, or	independent jobs,	at home or in	(e.g. reduced	restricted	unsuccessful; no	work or adapt to	appropriate
related functions,	working in	in independent job,	mental distress	with currently	productivity	often unable to	primarily in most
employment-	functioning,	functional working	productivity with	productivity; often	attempts at	severely limited;	Rate functioning
Optimally performs	Adequate	Moderately	Marginal	Limited	Occasional	Productivity	15-Productivity:
No support	low level supports	intermittent support	support for DLA	intense supports	extensive supports	pervasive supports	ANCHORS
independence with	impairment, needs	impairment,	routine, frequent	serious symptoms;	impairment, needs	impairment, needs	(DLA-20TM)
optimal	Intermittent mild	Mild functional	impairment;	impairment with	functional	severe functional	ACTIVITIES
7- WNL-Strength	6- WNL-Strength	5- WNL/Strength	4- Moderate	3- Serious	2- Severe	1- Extremely	DAILY LIVING

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MTMSERVICES

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DLA-20© Scoring Rules

- Assess needs, level of functioning, and impairments compared to the GENERAL POPULATION using anchors.
- Each Item on the DLA-20 is rated on a 7 point scale:
 - 1= extremely severe, totally dependent with pervasive need
 - 2= severe problem, concern for safety, danger to self/others
 - 3= serious problem, sometimes independent with extensive help
 - 4= moderate impairments, always needs supports
 - 5= mild impairments with independent strengths, often requires some help and routine support
 - 6= adequate independence with few supports
 - 7= optimal independence
- Scoring is based on an evaluation of the <u>past 30 days</u>. If functioning varied in the last 30 days, rate the lowest score on the more frequent pattern of behavioral responses to symptoms.
- > Once you pick a score, look at the anchor score one lower to make sure a lower score is not more accurate. Continue this process until the most accurate score is found.
- > If you cannot decide between two scores, always choose the lower score based on current data.
- Consider impairments in functioning due to physical limitations as well as those due to mental impairments that affect functioning (e.g. diabetes, TBI)
- > Do not consider environmental/ community limitations (e.g. "no job/ no appropriate school or home placement available")
- The score is not always correlated with the clients self-reported functioning- trust your own assessment using information provided by the client/ family, collateral information, and your observations. Use the anchors defining strengths & needs compared to the general population.
- The provider is asked to collaborate and review the score on each domain during the clinical interview and indicate the raw score for each item. The average score is the total sum of the ratings on the 20 items divided by the number of items rated. All domains are relevant.
- ➤ Must score at least 15 items*

*NOTE: If more that 25% (N=5) of the total items on the measure are missing the tool is not valid. Therefore, the provider and individual receiving care (or informant) should be encouraged to complete all 20 items on the measure.